WISCONSIN JUDICIAL COMMISSION

110 East Main Street, Suite 606 Madison, WI 53703 Phone: (608) 266-7637

Fax: (608) 266-8647

Instructions for Completing "REQUEST FOR INVESTIGATION"

Please read the following instructions carefully before completing your Request for Investigation.

- 1. Print or type all information except your signature.
- 2. Provide as much information about the alleged misconduct or disability as you can, including relevant dates, times, and places; identify known witnesses.
- 3. Attach any pertinent documents in your possession, such as transcripts of proceedings, or clearly indicate which documents you believe contain evidence of the alleged misconduct or disability. You may submit a portion of a lengthy document rather than the entire document.
- 4. You may use additional sheets of paper, if necessary.
- 5. Please check the box on page 3 if you request the Commission not to disclose your identity to the judge or court commissioner prior to the filing of a petition or formal complaint with the Supreme Court.
- 6. Sign and date the form and sent it to the Wisconsin Judicial Commission at the above address.

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REQUEST FOR INVESTIGATION

Name:							
Addres	ss:	(please type or print)					
Phone:		Daytime () Evening ()					
	I have i	nformation of possible misconduct or disability on the part of					
		or court commissioner) , of the	Court in				
(name	of judge (or court commissioner)					
		(city) (county)	_, Wisconsin.				
		STATEMENT OF FACTS					
1.	When a	nd where did this happen?					
	Date(s)	: Time: Location:					
2. If you		information arises out of a court case, please answer these questions:					
	a)	What is the name and number of the case?					
		Case name: Case no.:					
	b)	What kind of case is it?					
		□ criminal, □ domestic relations, □ small claims, □ probate,					
		□ civil, □ juvenile, □ other (specify):					

c)	What is your relationship to the case?				
	☐ plaintiff/petitioner	☐ defendant/ı	respondent		
	☐ attorney for				
	☐ witness for				
	☐ other (specify):				
d)	If you were represented by an attorney in this matter at the time of the conduct of the judge or court commissioner, please identify the attorney:				
	Name:				
	Address:				
	Phone: ()				
e)	Identify any other attorney(s) who represented you or any person involved in the c				
	Name of attorney:				
	Addresses:				
	Phone:	()	()		
	Represented:				
List	•	pport your information	that the judge or court commiss		
	ged in misconduct or has a disability, noting which ones you have attached:				
					

4.	Identify, if you can, any other witnesses to the conduct of the judge or court commissioner:					
	Name(s):					
	Addresses:					
	Phone:	()	()			
	Specify below the details of what the judge or court commissioner did that you think constitutes misconduct or indicates disability. (Please type or print legibly; attach additional paper if necessary.)					
PROCE MAY R COURT	EDINGS ON THIS REQUES' EQUEST THE COMMISSIC	T FOR INVESTIGATION ARE ON NOT TO DISCLOSE MY I	THE JUDICIAL COMMISSION'S CONFIDENTIAL AND THAT I DENTITY TO THE JUDGE OR ON OR FORMAL COMPLAINT			
	I REQUEST THE C JUDGE OR COURT (LOSE MY IDENTITY TO THE			
Signatur	·e:	Date:				